

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM JC/OH  
COVER SHEET PG 1**

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers)		<b>2 Total pages filed:</b> 5																		
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">MS / MRS / MR</td> <td style="width: 35%;">FIRST <b>Robert</b></td> <td style="width: 15%;">MI</td> <td colspan="2"></td> </tr> <tr> <td>NICKNAME</td> <td>LAST <b>Ramirez</b></td> <td>SUFFIX</td> <td colspan="2"></td> </tr> </table>				MS / MRS / MR	FIRST <b>Robert</b>	MI			NICKNAME	LAST <b>Ramirez</b>	SUFFIX			<b>OFFICE USE ONLY</b>							
	MS / MRS / MR	FIRST <b>Robert</b>	MI																			
NICKNAME	LAST <b>Ramirez</b>	SUFFIX																				
Date Received																						
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">ADDRESS / PO BOX; [REDACTED]</td> <td style="width: 15%;">APT / SUITE #;</td> <td style="width: 20%;">CITY; <b>Lake Dallas</b></td> <td style="width: 10%;">STATE; <b>TX</b></td> <td style="width: 30%;">ZIP CODE <b>75065</b></td> </tr> </table>				ADDRESS / PO BOX; [REDACTED]	APT / SUITE #;	CITY; <b>Lake Dallas</b>	STATE; <b>TX</b>	ZIP CODE <b>75065</b>	Date Hand-delivered or Date Postmarked  <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>		Receipt #	Amount \$	Date Processed		Date Imaged						
ADDRESS / PO BOX; [REDACTED]	APT / SUITE #;	CITY; <b>Lake Dallas</b>	STATE; <b>TX</b>	ZIP CODE <b>75065</b>																		
Receipt #	Amount \$																					
Date Processed																						
Date Imaged																						
<b>5 CANDIDATE/ OFFICEHOLDER PHONE</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">AREA CODE ( [REDACTED] )</td> <td style="width: 40%;">PHONE NUMBER [REDACTED]</td> <td style="width: 40%;">EXTENSION</td> </tr> </table>				AREA CODE ( [REDACTED] )	PHONE NUMBER [REDACTED]	EXTENSION	Date Hand-delivered or Date Postmarked  <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>		Receipt #	Amount \$	Date Processed		Date Imaged								
AREA CODE ( [REDACTED] )	PHONE NUMBER [REDACTED]	EXTENSION																				
Receipt #	Amount \$																					
Date Processed																						
Date Imaged																						
<b>6 CAMPAIGN TREASURER NAME</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">MS / MRS / MR</td> <td style="width: 35%;">FIRST <b>Roy</b></td> <td style="width: 15%;">MI</td> <td colspan="2"></td> </tr> <tr> <td>NICKNAME</td> <td>LAST <b>Magno</b></td> <td>SUFFIX</td> <td colspan="2"></td> </tr> </table>				MS / MRS / MR	FIRST <b>Roy</b>	MI			NICKNAME	LAST <b>Magno</b>	SUFFIX			Date Hand-delivered or Date Postmarked  <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>		Receipt #	Amount \$	Date Processed		Date Imaged	
MS / MRS / MR	FIRST <b>Roy</b>	MI																				
NICKNAME	LAST <b>Magno</b>	SUFFIX																				
Receipt #	Amount \$																					
Date Processed																						
Date Imaged																						
<b>7 CAMPAIGN TREASURER ADDRESS</b> (Residence or Business)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 35%;">STREET ADDRESS (NO PO BOX PLEASE); [REDACTED]</td> <td style="width: 15%;">APT / SUITE #;</td> <td style="width: 20%;">CITY; <b>Flower Mound</b></td> <td style="width: 10%;">STATE; <b>TX</b></td> <td style="width: 20%;">ZIP CODE <b>74028</b></td> </tr> </table>					STREET ADDRESS (NO PO BOX PLEASE); [REDACTED]	APT / SUITE #;	CITY; <b>Flower Mound</b>	STATE; <b>TX</b>	ZIP CODE <b>74028</b>												
STREET ADDRESS (NO PO BOX PLEASE); [REDACTED]	APT / SUITE #;	CITY; <b>Flower Mound</b>	STATE; <b>TX</b>	ZIP CODE <b>74028</b>																		
<b>8 CAMPAIGN TREASURER PHONE</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">AREA CODE ( [REDACTED] )</td> <td style="width: 40%;">PHONE NUMBER [REDACTED]</td> <td style="width: 40%;">EXTENSION</td> </tr> </table>					AREA CODE ( [REDACTED] )	PHONE NUMBER [REDACTED]	EXTENSION														
AREA CODE ( [REDACTED] )	PHONE NUMBER [REDACTED]	EXTENSION																				
<b>9 REPORT TYPE</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td colspan="2"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td colspan="2"><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>					<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)		<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)								
<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)																			
<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)																			
<b>10 PERIOD COVERED</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Month <b>07</b></td> <td style="width: 10%;">Day <b>01</b></td> <td style="width: 15%;">Year <b>2018</b></td> <td style="width: 10%; text-align: center;">THROUGH</td> <td style="width: 15%;">Month <b>12</b></td> <td style="width: 10%;">Day <b>31</b></td> <td style="width: 15%;">Year <b>2018</b></td> </tr> </table>					Month <b>07</b>	Day <b>01</b>	Year <b>2018</b>	THROUGH	Month <b>12</b>	Day <b>31</b>	Year <b>2018</b>										
Month <b>07</b>	Day <b>01</b>	Year <b>2018</b>	THROUGH	Month <b>12</b>	Day <b>31</b>	Year <b>2018</b>																
<b>11 ELECTION</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">                 ELECTION DATE                  Month Day Year  <b>11 / 06 / 2018</b> </td> <td style="width: 70%;">                 ELECTION TYPE  <input type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description  <input checked="" type="checkbox"/> General    <input type="checkbox"/> Special             </td> </tr> </table>					ELECTION DATE Month Day Year <b>11 / 06 / 2018</b>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special															
ELECTION DATE Month Day Year <b>11 / 06 / 2018</b>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special																					
<b>12 OFFICE</b>	OFFICE HELD (if any) <b>County Court at Law #2</b>		<b>13 OFFICE SOUGHT (if known)</b> <b>County Court at Law #2</b>																			

**GO TO PAGE 2**

**FORM JC/OH  
COVER SHEET PG 2**

---

Forms provided by Texas Ethics Commission      [www.ethics.state.tx.us](http://www.ethics.state.tx.us)      Revised 9/8/2015

# SUBTOTALS - JC/OH

## FORM JC/OH COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$\$0.00
2.	<input type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$\$0.00
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$\$0.00
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$\$0.00
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$\$0.00
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$\$0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$\$0.00
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$\$0.00
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$\$0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$\$0.00
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$\$0.00
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$\$0.00

# OUTSTANDING LOANS

## SCHEDULE L

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule L:  
1

**2** FILER NAME  
Robert Ramirez

**3** Filer ID (Ethics Commission Filers)

LENDER  
INFORMATION

**4** Name of lender

Robert Ramirez

**5** Lender address; City; State; Zip Code

PO Box 850 Lake Dallas TX 75077

GUARANTOR  
INFORMATION

**6** Name of guarantor

☒ not applicable

**7** Guarantor address; City; State; Zip Code

LENDER  
INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR  
INFORMATION

Name of guarantor

☐ not applicable

Guarantor address; City; State; Zip Code

LENDER  
INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR  
INFORMATION

Name of guarantor

☐ not applicable

Guarantor address; City; State; Zip Code

LENDER  
INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR  
INFORMATION

Name of guarantor

☐ not applicable

Guarantor address; City; State; Zip Code

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# ASSETS VALUED AT \$500 OR MORE

## SCHEDULE M

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule M:

1

**2** FILER NAME

Robert Ramirez

**3** Filer ID (Ethics Commission Filers)

**4** Description of Asset

signs, push cards, mags, pins, cups, t-posts, cards, mailers

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**